

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN  
Bureau of Quality Assurance  
P.O. Box 2969  
Madison WI 53701-2969

**Facility Information**

**Facility Name:** BELLEWOOD AVENUE COMMUNITY RESIDENCE (610255)

**Address:** 2211 BELLEWOOD AVENUE, SCHOFIELD, WI 54476

**License Status:** REGULAR

**Licensed/Certified/Registered** 10/17/1995

**Regional Office:** NORTHERN REGION (RHINELANDER), (715) 365-2800

**Survey History**

**Survey ID:** 0096594      **End Date:** 03/21/2006      **Type:** STANDARD      **Purpose:** SURVEY/SELF REPORT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

**Survey ID:** 0092725      **End Date:** 04/20/2004      **Type:** STANDARD      **Purpose:** SURVEY

**Results:** ENFORCEMENT ACTION

**Statement of Deficiency:** #10009281    Served 06/15/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.17(3)(a)2	ACCURATE ACCOUNTING OF RESIDENT FUNDS	03/21/2006	Yes

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

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**Enforcement History**

**Date: 06/11/2004      SOD #10009281      Appealed: Yes      Decision: DISMISSED**

Sanctions

FORFEITURE---83.17(3)(a)2  
FORFEITURE---83.19(1)(e)1  
FORFEITURE---83.21(4)(m)

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